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Table 1	IL ROO
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Fee Transmitta sion	1	'		1
	MENDMENT TRANSMIT		omey's Docket No: 169-CIP-C3	
Serial No. 08/397,320	Filing Date 3/2/95	Examiner Scheiner, L.		roup Art Unit 313
Yn Re Application of Metall TO THE ASSISTANT COMMISSION	oproteinase Inhibitor			
t •	r the following extension of time due date (\$110.00)	under 37 C.F.I	Ť.	CEIVEL 2 0 1995
	nal due date (\$900.00) al due date (\$1,400.00)		Nov	2 0 1995
X A response in connection X is filed herewith.	with the matter for which this expression \dot{x}	ctension is requ	uested:	Carried arrest Minus
The response is the f	iling of a continuation application	n having an ex	press abandonmen	t conditioned

		C	LAIMS AS AMENDE	D		
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of extra claims present	(6) Rate	(7) Additional Fee
Total Claims		Minus	=		x \$22	=
Indep. Claims		Minus	=		x \$78	=

The accompanying papers include amended claims for which no additional fee is required.

on the granting of a filing date to the continuing application.

X	The following	other fees are	e incurred by t	the accompanying	papers.

X Fee Pursuant to 37 CFR 1.17(r) - \$750.00

Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$ 1.650.00. A duplicate copy of this petition is attached.

If an additional extension of time is required, please consider this a petition therefore.

The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.

Please Send Future Correspondence To:

U.S. Patent Operations/KMP

M//S 10-1-B

AMGEN INC.

Amgen Center

1840 Dehavilland Drive

Thousand Oaks, California 91320-1789

Attorney/Agent for Applicant(s) 519 11/17/95 0839/32 Registration No. 34,899 117
Phone: (805) 447.5463

Date: October 27, 1995

Phone: (805) 447-2193

"Express Mail" mail tabeling number Date of Decosit October 27, 1995

I hereby certify that this paper or lee is being deposited with the United States Postal Service "Expr and is addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

SORENSEN

^{*}If the entry in column 2 is less than the entry in column 4, write *0* in column 5.

^{**}If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***}If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Fee Transmittal & Emension

	FEE AUTHORIZATION /AMENDMENT TRANSMITTAL LETTER					
AND ROOM	Serial No. 08/397,320	Filing Date 3/2/95	Examine Scheine			
· OCT / 38	In Re Application of Metalloproteinase Inhibitor					
1995 TO THE ASSISTANT COMMISSIONER OF PATENTS:						
Applicant(s) petition(s) for the following extension of time under 37 C One month of original due date (\$110.00)						

FEE AUTH	ORIZATION /AN LET	IENDME TER	NTTRANSMITT	AL	Attorney's D A-169-CIP-C		10:
Serial No. 08/397,320		Filing Da 3/2/95	te	Examine Scheiner		·	Group Art Unit 1813
In Re Application of		roteinase	Inhibitor		ŧ.		**************************************
TO THE ASSISTA	NT COMMISSIONE						PECENT
X Applica	nt(s) petition(s) for th	ne followin	g extension of time	under 37 (C.F.R. 1.136(a):	RECEIVE
One	month of original du	ue date (\$	110.00)				NOV 2 0 1995
Two	months of original o	due date (\$380.00)				
X Thre	ee months of origina	due date	(\$900.00)		(a. 5, 21)		
Fou	r months of original	due date (\$1,400.00)		3		سپهر
X A respo	nse in connection w	ith the ma	tter for which this ex	tension is	requested:		
X is fi	led herewith.						
The	response is the filir	ng of a cor	tinuation application	n having a	n express aba	andonm	nent conditioned
	he granting of a filin	_	• •	•	•		
X The acc	companying papers i	nclude an	nended claims for w	hich no ad	ditional fee is	require	∌d.
The acc	companying papers	nclude an	ended claims the fe	e for whic	h has been c	alculate	ed as follows:
(4)	(0)		AIMS AS AMENDI		I (A)	· · · · · · · · · · · · · · · · · · ·	750
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of ex claims present	Rate		(7) Additional Fee
Total Claims		Minus	=		x \$22	=	
Indep. Claims		Minus	=	Amonda	x \$78	=	
*If the entry is column	- 0 is less than the sec		dditional Fee for this		ent		
If the "Highest Num *If the "Highest Num X The follow	n 2 is less than the en ther Previously Paid F mber Previously Paid twing other fees are	or" IN THIS For" IN THI incurred b	SPACE is less than a SSPACE is less than by the accompanying	20, write "20 3, write "3"	•		;
X Fe	e Pursuant to 37	CFR 1.	17(r) - \$750.00				
Please charge Dep copy of this petition	posit Account No. 01 n is attached.	-0519 in t	he name of Amgen	Inc. in the	amount of <u>\$</u>	<u>1,650</u>	.00. A duplicate
χ If an add	litional extension of	time is rec	juired, please consi	der this a	etition theref	ore.	
	nmissioner is hereby panying papers, or c		•		•	•	uired by the
Please Send Futur U.S. Patent Opera M//S 10-1-B AMGEN INC. Amgen Center	re Correspondence tions/KMP	<u>Io:</u>		Pessin /Agent for tion No.: 3	Applicant(s)		

Amgen Center 1840 Dehavilland Drive Phone: (805) 447-2193 Thousand Oaks, California 91320-1789 Date: October 27, 1995

"Express Mail" mail labeling number TB813594276 Date of Deposit October 27, 1995

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ELLEN J. SORENSEN